

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail Stop ISSUE FEE**
Commissioner for Patents
Alexandria, Virginia 22313-1450
Fax (703)746-4000

SEP 22 2003

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence, including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

23370 7590 08/14/2003

JOHN S. PRATT, ESQ
KILPATRICK STOCKTON, LLP
1100 PEACHTREE STREET
SUITE 2800
ATLANTA, GA 30309

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Emily Guida	(Depositor's name)
<i>Emily Guida</i>	(Signature)
September 22, 2003	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/056,913	01/25/2002	Harish C. Joshi	E2690/268902	3014

TITLE OF INVENTION: DELIVERY SYSTEMS AND METHODS FOR NOSCAPINE AND NOSCAPINE DERIVATIVES, USEFUL AS ANTICANCER AGENTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$650	\$300	\$950	11/14/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
JONES, DWAYNE C	1614	514-320000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	Kilpatrick Stockton LLP Bruce D. Gray

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Emory University

Atlanta, Georgia

Please check the appropriate assignee category or categories (will not be printed on the patent) individual corporation or other private group entity government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee
 Advance Order - # of Copies 10

Payment of Fee(s):

A check in the amount of the fee(s) is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Commissioner is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 11-0855 (enclose an extra copy of this form).

Commissioner for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

Aleta A. Mills, Reg. No. 47,794

(Authorized Signature) (Date)

Aleta A. Mills

September 19, 2003

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09/26/2003 MAHMEDE 00000042 10056913

01 FC:2501	650.00 OP
02 FC:1504	300.00 OP
03 FC:8001	30.00 OP

TRANSMIT THIS FORM WITH FEE(S)

SEP 22 2003

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

980

<i>Complete If Known</i>	
Application Number	10/056,913
Filing Date	January 25, 2002
First Named Inventor	Joshi et al.
Examiner Name	Jones, D.
Art Unit	1614
Attorney Docket No.	E2690/268902

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Other None
Order
 Deposit Account:Deposit
Account
Number

11-0855

Deposit
Account
Name

Kilpatrick Stockton LLP

The Director is authorized to: (check all that apply)

-
- Charge fee(s) indicated below
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- Credit any overpayments
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- Charge any additional fee(s) during the pendency of this application
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-
- Charge fee(s) indicated below, except for the filing fee
-
- to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1)

(\$0)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

		Extra Claims	Fee from below	Fee Paid
Total Claims		-20 **	= 0	X = 0
Independent Claims		-3 **	= 0	X = 0
Multiple Dependent			X = 0	

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$0)

*or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1051	130	Surcharge - late filing fee or oath	
		1052	50	Surcharge - late provisional filing fee or cover sheet.	
		1053	130	Non-English specification	
		1812	2,520	For filing a request for reexamination	
		1804	920*	Requesting publication of SIR prior to Examiner action	
		1805	1,840*	Requesting publication of SIR after Examiner action	
		1251	110	Extension for reply within first month	
		1252	410	Extension for reply within second month	
		1253	930	Extension for reply within third month	
		1254	1,450	Extension for reply within fourth month	
		1255	1,970	Extension for reply within fifth month	
		1401	320	Notice of Appeal	
		1402	320	Filing a brief in support of an appeal	
		1403	280	Request for oral hearing	
		1451	1,510	Petition to institute a public use proceeding	
		1452	110	Petition to revive – unavoidable	
		1453	1,300	Petition to revive – unintentional	
		1501	1,300	Utility issue fee (or reissue)	650
		1502	470	Design issue fee	
		1503	630	Plant issue fee	
		1460	130	Petitions to the Commissioner	
		1807	50	Processing fee under 37 CFR 1.17 (q)	
		1806	180	Submission of Information Disclosure Stmt	
		8021	40	Recording each patent assignment per property (times number of properties)	
		1809	750	Filing a submission after final rejection (37 CFR § 1.129(a))	
		1810	750	For each additional invention to be examined (37 CFR § 1.129(b))	
		1801	750	Request for Continued Examination (RCE)	
		1802	900	Request for expedited examination of a design application	
				Other fee (specify) Publication Fee of \$300 and Advance Order of 10 copies at \$3/copy=\$30	330

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 980)

SUBMITTED BY

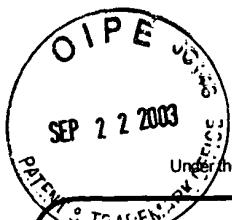
Complete (if applicable)

Name (Print/Type)	Aleta A. Mills	Registration No. (Attorney/Agent)	47,794	Telephone	404.815.6409
Signature	<i>Aleta A. Mills</i>				

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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B\$

PTO/SB/21 (08-03)
Approved for use through 07/31/2006, OMB 0651-0031

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/056,913
		Filing Date	January 25, 2002
		First Named Inventor	Joshi et al.
		Art Unit	1614
		Examiner Name	Jones, D.
Total Number of Pages in This Submission		Attorney Docket Number	E2690/268902

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> -Fee Address Indication Form PTO/SB/47 -Part B-Fee Transmittal PTOL-85 -Check in amount of \$980 -Return Receipt Postcard
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Aleta A. Mills, Reg. No. 47,794 Kilpatrick Stockton LLP
Signature	<i>Aleta A. Mills</i>
Date	September 19, 2003

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Emily Guida
Signature	<i>Emily Guida</i>
Date	September 19, 2003

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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